FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person [*] SEVIN IRIK						2. Issuer Name and Ticker or Trading Symbol <u>STAR GAS PARTNERS LP</u> [SGU, SGH]									(Check	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle)					- 3. Date of Earliest Transaction (Month/Day/Year) 03/15/2005										Officer (gi below)	ve title		Other (below)	specify		
C/O STAR GAS PARTNERS, L.P. 2187 ATLANTIC STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)									Line)	,					
(Street) STAMFOR (City)		ate)	06902 (Zip)												X		•		orting Pers		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) Date (Month/Day							2A. Deemed Execution Date, if any (Month/Day/Year			, Transaction Disp Code (Instr. and			osed Of		ed (A) or tr. 3, 4	5. Amount Securities Beneficiall Owned		Form (D) or Indire	ect (I)	7. Nature of Indirect Beneficial Ownership	
										Code	ode V		Amount (A) o (D)		Price	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Senior Subordinated Units 03/15/20					/15/20	05			М		102	2,000	A	\$2.68	286,067 ⁽¹⁾			D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution any (Month/Da	Date, if	Code (Ins				Expir	te Exerci: ration Da hth/Day/Y	te	7. Title and Amount o Securities Underlying Security (Instr. 3 and		ing Derivative	8. Price of Derivative Security (Instr. 5)	9. Numt derivativ Securiti Benefic Owned Followi Reporte Transac	ve ies ially ng ed	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	cisable	Expirati Date	on	Title		Amount or Number of Shares		(Instr. 4				
UAR ⁽²⁾	\$10.7	03/15/2005			М			77,419	03/1	5/2005	03/15/2	2005 ⁽¹⁾		nior dinated	102,000(1)	\$2.68 ⁽¹⁾	0)	D		

Explanation of Responses:

1. Does not include 29,133 Senior Subordinated Units issued to Star Gas LLC, the general partner of the Partnership, pursuant to the Contingent Distribution. As a member of Star Gas LLC, Mr. Sevin may be deemed to share beneficial ownership of these Units, but he disclaims beneficial ownership in that number of Units that exceeds his proportionate interest in Star Gas LLC.

2. In accordance with the Star Gas Partners' Senior Management Equity Incentive Plan (the "Plan") of Star Gas Partners, L.P. (the "Partnership"), effective as of October 1, 2002, Mr. Sevin agreed to accept 77,419 unit appreciation rights (the "Rights') in lieu of \$120,000 in cash compensation. The Rights vested in three equal installments on October 1, 2002, October 1, 2003 and October 1, 2004. Mr. Sevin exercised the Rights effective as of March 15, 2005 in consideration of the issuance of 102,000 Senior Subordinated Units and a cash payment of \$13,603.

/s/ Irik P. Sevin	03/17/2005				
** Signature of Reporting Person	Date				

Units⁽¹⁾

Signature of Reporting Person

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.